'ART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address.

maintenance lee notitica	tions.							
CURRENT CORRESPOND	F	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
23347 7590 06/27/2007								
GLAXOSMIT	Certificate of Mailing or Transmission							
CORPORATE I	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
FIVE MOORE I	ddressed to the Management of the US	ail Stop ISSU SPTO (571) 273	E FEE address : 3-2885, on the da	above, or being facsimile ate indicated below.				
RESEARCH TR	(Depositor's name)							
							(Signature)	
			Ĺ				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/506,447 09/01/2004 5			Stanley Dawes Chambe	rlain	PU47	PU4759USW 9987		
TITLE OF INVENTION	: DIAMINO-PYRIMIDI	INES AND THEIR USE	AS ANGIOGENESIS I	NHIBITORS				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISS	UE FEE TOTAL FEE(S) D		DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0		\$1700	09/27/2007	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	\neg	3			
BALASUBRAMANIAN, VENKATARAMAN 1624			514-275000	→				
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 John L. Lemanowicz								
Change of corresp Address form PTO/SI	or agents OR, altern	or agents OR, alternatively,						
"Fee Address" ind	single firm (having as a member a 2 Jennifer L. Fox yor agent) and the names of up to							
PTO/SB/47; Rev 03-0 Number is required.)2 or more recent) attach	2 registered patent attorneys or agents. If no name is 3						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
SmithKline Beecham Corporation Philadelphia, PA								
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🗷 Corporation or other private group entity 🚨 Government								
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
■ Issue Fee ☐ A check is enclosed.								
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.								
Advance Order - i	# of Copies 4 (Fou	<u>r)</u>	The Director is her overpayment, to De	eby authorized to cle posit Account Nun	narge the require the requirement of the requiremen	ed fee(s), any def 2 (enclose ar	ficiency, or credit any nextra copy of this form).	
5. Change in Entity Sta	•	·						
	s SMALL ENTITY state		b. Applicant is no				R 1.27(g)(2). e assignee or other party in	
interest as shown by the	records of the United Sta	ates Patent and Trademark	Office.	in the application, a re	- gracered attorn	- agent, or the	e assignee of other party in	
Authorized Signature	YOLF.	Lumm	my	Date Se	pt 27	7007	<u></u>	
Typed or printed nam	John L. Le	manowicz	Registration	Registration No. 37,380				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								
	,						-	